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CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

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UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

BCV 08

2797

CASE NO. \_\_\_\_\_

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

RMW  
(PR)

Plaintiff,

vs.

Defendant.

I, MICHAEL J. CONNOLY, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes        No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

26 Gross: \_\_\_\_\_ Net: \_\_\_\_\_

27 Employer: \_\_\_\_\_

28 \_\_\_\_\_

If the answer is "no," state the date of last employment and the amount of the gross and net salary and wages per month which you received. (If you are imprisoned, specify the last place of employment prior to imprisonment.)

1977 \$400.00 HIGHLAND DELL RESTAURANT, MONTE RIO, CA.

2. Have you received, within the past twelve (12) months, any money from any of the following sources:

- a. Business, Profession or self employment Yes  No
- b. Income from stocks, bonds, or royalties? Yes  No
- c. Rent payments? Yes  No
- d. Pensions, annuities, or life insurance payments? Yes  No
- e. Federal or State welfare payments, Social Security or other government source? Yes  No

If the answer is "yes" to any of the above, describe each source of money and state the amount received from each.

3. Are you married? Yes  No

Spouse's Full Name: \_\_\_\_\_

Spouse's Place of Employment: \_\_\_\_\_

Spouse's Monthly Salary, Wages or Income:

Gross \$\_\_\_\_\_ Net \$\_\_\_\_\_

4. a. List amount you contribute to your spouse's support: \$\_\_\_\_\_

1           b. List the persons other than your spouse who are dependent upon you for  
 2           support and indicate how much you contribute toward their support. (NOTE:  
 3           For minor children, list only their initials and ages. DO NOT INCLUDE  
 4           THEIR NAMES.).

5 \_\_\_\_\_  
 6 \_\_\_\_\_  
 7 5. Do you own or are you buying a home? Yes \_\_\_ No

8           Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

9 6. Do you own an automobile? Yes \_\_\_ No

10           Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

11           Is it financed? Yes \_\_\_ No \_\_\_ If so, Total due: \$ \_\_\_\_\_

12           Monthly Payment: \$ \_\_\_\_\_

13 7. Do you have a bank account? Yes \_\_\_ No  (Do not include account numbers.)

14           Name(s) and address(es) of bank: \_\_\_\_\_  
 15 \_\_\_\_\_

16           Present balance(s): \$ \_\_\_\_\_

17           Do you own any cash? Yes \_\_\_ No  Amount: \$ \_\_\_\_\_

18           Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19           market value.) Yes \_\_\_ No   
 20 \_\_\_\_\_

21 8. What are your monthly expenses?

22           Rent: \$ \_\_\_\_\_ Utilities: \_\_\_\_\_

23           Food: \$ \_\_\_\_\_ Clothing: \_\_\_\_\_

24           Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

1       9. Do you have any other debts? (List current obligations, indicating amounts and to  
2 whom they are payable. Do not include account numbers.)  
3 \_\_\_\_\_  
4 \_\_\_\_\_

5       10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes        No X  
7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.  
9 \_\_\_\_\_  
10 \_\_\_\_\_

11      I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13      I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15      6-16-08  
16      DATE

*Michael J. Connolly*  
17      SIGNATURE OF APPLICANT

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1  
2 Case Number: \_\_\_\_\_  
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8

9 CERTIFICATE OF FUNDS  
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11

IN  
12 PRISONER'S ACCOUNT  
13  
14

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Michael Joseph Connolly for the last six months at [prisoner name]

California State Prison - Solano where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 00 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 46,26.

Dated: 6/2/08

*Jessa Ayers, Accounting Tech.*  
[Authorized officer of the institution]

CALIFORNIA DEPARTMENT OF CORRECTIONS  
CALIFORNIA STATE PRISON SOLANO  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: DEC. 02, 2007 THRU JUN. 02, 2008

BED/CELL NUMBER: S101T2000000217U  
ACCOUNT TYPE: I

ACOUNT NUMBER : P52999  
ACCOUNT NAME : CONNOLLY, MICHAEL JOSEPH  
PRIVILEGE GROUP: A

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at

11:59:59

AM

by

user

on

Michael Connolly  
P-2999 1-217  
P. Solano, P.O. Box 4000  
San Francisco, CA. 95696

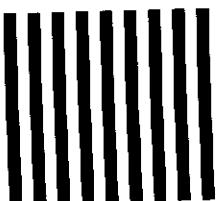
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6-23-08 X

att

X Allen Thompson, C.